

Colorado Secretary of State
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Space Below For Office Use Only

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Article XXVIII of the Colorado Constitution and Tital 1, Article 45 of the Colorado Revised Statute (C.R.S.)

Full Name of Committee/Person:	Committee for Joe Anderson for City Council
As Shown On Registration	
Address of Committee/Person:	4061 S. Cherokee St
City, State & Zip Code:	Englewood CO 80110
Committee Type:	Candidate Committee
Name and Address of Financial Institution	Wells Fargo 3333 S. Bannock St Englewood CO 80110

Type of Report

Pre-election Reports

☐ 10/17/17, 5:00 p.m. (21 days prior to election)
Reporting period: from the beginning of the initial filing through October 12, 2017

☐ 11/3/17, 5:00 p.m.
Reporting period: from October 13, 2017 through October 29, 2017

Post-election Reports

☐ 12/7/17, 5:00 p.m. (30 days following election)
Reporting period: from October 30, 2017 through December 2, 2017

☐ Annual (November 1, 2018, 5:00 p.m.)
[This additional filing is required, if your December 2, 2017 filing does not reflect a zero balance.]
Reporting period: from December 3, 2017 through October 27, 2018

Is this Report an Amendment?

☐ Yes ☐ No
This amends the filing of (date) _____
[Submit changes or new information only.]

Termination Report

[Termination Report MUST have a ZERO balance.]
☐ Date _____

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 0.00
2	Total Monetary Contributions (line 11)	\$ 2242.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 2242.00
4	Total Monetary Expenditures (line 19)	\$ 1201.98
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 1040.02

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
[Art. XXVIII Sec. 10(2)(a)]

Authorization (Must be completed by either the Registered Agent OR the Candidate): I hereby certify and declare, under penalty of perjury, that to the best of my knowledge or belief all contributions received during this reporting period, including any contributions received in the form of membership dues transferred by a membership organization, are from permissible sources.

Print Registered Agent's Name: _____

Registered Agent's Signature: _____ Date: _____

Print Candidate Name: Joseph E. Anderson

Candidates Signature: _____ Date: 10/17/17

DETAILED SUMMARY

Full Name of Committee/Person: Committee for Joe Anderson For City Council

Current Reporting Period: 8/25/17 Through 10/12/17

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	0.00
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$	2236.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	6.00
8	Loans Received (From Schedule "C")	\$	0
9	Total of Other Receipts (Interest, Dividends, etc.)	\$	0
10	Returned Expenditures (from recipient) (From Schedule "D")	\$	0
11	Total Monetary Contributions (Total of lines 6 through 10)	\$	2242.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	0
13	Total Contributions (Line 11 + line 12)	\$	2242.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$	1040.02
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	82.53
16	Loan Repayments Made (From Schedule "C")	\$	0
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$	0
18	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$	0
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$	1201.98
20	Total Spending (Line 18 + line 19)	\$	1201.98

Schedule A – Itemized Contributions Statement (\$20 or more)

1

Full Name of Committee/Person:

Committee for Joe Anderson For City Council

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. Date Accepted <u>8/25/17</u>	4. Name (Last, First): <u>Anderson, Joe</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>4061 S. Cherokee St</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Headwaters Christian Resources</u>
	9. Occupation (if applicable, mandatory): <u>Publisher</u>

1. Date Accepted <u>9/1/17</u>	4. Name (Last, First): <u>Cheadle, Dave</u>
2. Contribution Amt. \$ <u>300.00</u>	5. Address: <u>3706 S. Acoma St</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Self-Employed</u>
	9. Occupation (if applicable, mandatory): <u>Writer</u>

1. Date Accepted <u>9/15/17</u>	4. Name (Last, First): <u>Anderson, Joe</u>
2. Contribution Amt. \$ <u>25.00</u>	5. Address: <u>4061 S. Cherokee St</u>
3. Aggregate Amt. * \$ <u>75.00</u>	6. City/State/Zip: <u>Englewood CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Headwaters Christian Resources</u>
	9. Occupation (if applicable, mandatory): <u>Publisher</u>

1. Date Accepted <u>9/15/17</u>	4. Name (Last, First): <u>Strawbridge, Stephen</u>
2. Contribution Amt. \$ <u>170.00</u>	5. Address: <u>2760 S. Ogden St</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood CO 80113</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>MENE Inc</u>
	9. Occupation (if applicable, mandatory): <u>Business Consultant</u>

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec. 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

Schedule A – Itemized Contributions Statement (\$20 or more)

1

Full Name of Committee/Person: Committee for Joe Androsa for City Council

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. Date Accepted <u>9/15/17</u>	4. Name (Last, First): <u>Grimm, Bruce</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>4055 S. Cherokee St</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>9/15/17</u>	4. Name (Last, First): <u>Slater, Monica</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>4005 S. Cherokee St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Stay at home mom</u>
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>9/16/17</u>	4. Name (Last, First): <u>Okon, Michael</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>2881 S. Delaware</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Excel</u>
	9. Occupation (if applicable, mandatory): <u>Operator</u>

1. Date Accepted <u>9/16/17</u>	4. Name (Last, First): <u>Browne, Judy</u>
2. Contribution Amt. \$ <u>109.00</u>	5. Address: <u>1033 W. Stanford Pl</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Judy Browne Realty</u>
	9. Occupation (if applicable, mandatory): <u>Real Estate Agent</u>

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Schedule A – Itemized Contributions Statement (\$20 or more)

1

Full Name of Committee/Person: Committee for Joe Anderson of City Council

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. Date Accepted <u>9/17/17</u>	4. Name (Last, First): <u>Nelson, Erin</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>4666 S. Van Gordon Ct.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Morrison, CO 80465</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>not employed</u>
	9. Occupation (if applicable, mandatory): <u>AT</u>

1. Date Accepted <u>9/17/17</u>	4. Name (Last, First): <u>Ulrich, Carl</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>4270 S. Elati St</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Samuel Engineering</u>
	9. Occupation (if applicable, mandatory): <u>Electrical Designer</u>

1. Date Accepted <u>9/18/17</u>	4. Name (Last, First): <u>Olsen, Peder</u>
2. Contribution Amt. \$ <u>200.00</u>	5. Address: <u>3505 E. late way</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Centennial, CO 80121</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Englewood lighthouse</u>
	9. Occupation (if applicable, mandatory): <u>Pastor</u>

1. Date Accepted <u>9/19/17</u>	4. Name (Last, First): <u>Anderson, Steven</u>
2. Contribution Amt. \$ <u>250.00</u>	5. Address: <u>6500 W. 21st St N. Unit 46</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Wichita, KS 67206</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>City of Andover</u>
	9. Occupation (if applicable, mandatory): <u>City Engineer</u>

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Schedule A – Itemized Contributions Statement (\$20 or more)

Full Name of Committee/Person: Committee for Joe Anderson for City Council

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>9/19/17</u>	4. Name (Last, First): <u>Munger, Scott</u>
2. <u>Contribution Amt.</u> \$ <u>50.00</u>	5. Address: <u>850 Pulpit Rock Cir S.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80918</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. <u>Date Accepted</u> <u>9/20/17</u>	4. Name (Last, First): <u>Sickmeier, Thomas</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>7614 S. Datura St.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Littleton, CO 80120</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. <u>Date Accepted</u> <u>9/23/17</u>	4. Name (Last, First): <u>Brake, Byron</u>
2. <u>Contribution Amt.</u> \$ <u>50.00</u>	5. Address: <u>4975 S. Galapago St</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Englewood CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>MEP Engineering</u>
	9. Occupation (if applicable, mandatory): <u>Plumbing Project Engineer</u>

1. <u>Date Accepted</u> <u>9/23/17</u>	4. Name (Last, First): <u>Cowger, Les</u>
2. <u>Contribution Amt.</u> \$ <u>50.00</u>	5. Address: <u>4386 S. Huron St</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Englewood CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>CO dept. of Pub Health & Environment</u>
	9. Occupation (if applicable, mandatory): <u>Financial & Operations Manager</u>

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Schedule A – Itemized Contributions Statement (\$20 or more)

1

Full Name of Committee/Person:

Committee for Joe Anderson for City Council

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. Date Accepted <u>9/23/17</u>	4. Name (Last, First): <u>Nichols, Kaylsen</u>
2. Contribution Amt. \$ <u>21.00</u>	5. Address: <u>4501 S. Kalamath St</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>9/25/17</u>	4. Name (Last, First): <u>George, Jamie</u>
2. Contribution Amt. \$ <u>125.00</u>	5. Address: <u>6335 S. Ogden St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Centennial CO 80121</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Love INC</u>
	9. Occupation (if applicable, mandatory): <u>Ministry Director</u>

1. Date Accepted <u>9/26/17</u>	4. Name (Last, First): <u>Truskett, Brian</u>
2. Contribution Amt. \$ <u>250.00</u>	5. Address: <u>7438 E Oxford St</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Wichita, KS 67226</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Eby Construction</u>
	9. Occupation (if applicable, mandatory): <u>Project Development</u>

1. Date Accepted <u>9/27/17</u>	4. Name (Last, First): <u>Burey, John</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>3926 S. Acoma St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, mandatory): <u>Kohler Co</u>
	9. Occupation (if applicable, mandatory): <u>National Account Manager</u>

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Schedule A – Itemized Contributions Statement (\$20 or more)

Full Name of Committee/Person: Committee for Joe Anderson for City Council

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>10/10/17</u>	4. Name (Last, First): <u>Friedman, Chiles</u>
2. <u>Contribution Amt.</u> \$ <u>20.00</u>	5. Address: <u>3786 S. Acoma St</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Englewood CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Catholic Health Initiative</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>IT Programmer</u>

1. <u>Date Accepted</u> <u>10/11/17</u>	4. Name (Last, First): <u>Wilson, Amy</u>
2. <u>Contribution Amt.</u> \$ <u>25.00</u>	5. Address: <u>3695 S. Elati St</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Englewood CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>City & County of Denver</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Administrator</u>

1. <u>Date Accepted</u>	4. Name (Last, First):
2. <u>Contribution Amt.</u> \$	5. Address:
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip:
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>):

1. <u>Date Accepted</u>	4. Name (Last, First):
2. <u>Contribution Amt.</u> \$	5. Address:
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip:
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>):

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Schedule B – Itemized Expenditures Statement (\$20 or more)
[1-45-108(1)(a), C.R.S.]

Full Name of Committee/Person: Committee for Joe Anderson for city Council

PLEASE PRINT/TYPE

1. Date Expended <u>8/29/17</u>	4. Name: <u>Bluehost</u>
2. Amount \$ <u>101.40</u>	5. Address: <u>1958 950 E, Provo, UT 84606</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Provo, UT 84606</u>
	7. Purpose of Expenditure: <u>Website Hosting</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8/29/17</u>	4. Name: <u>Envato</u>
2. Amount \$ <u>61.00</u>	5. Address: <u>121 King St.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Melbourn Victoria 3000 Australia</u>
	7. Purpose of Expenditure: <u>Website software</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>9/1/17</u>	4. Name: <u>Envato</u>
2. Amount \$ <u>27.00</u>	5. Address: <u>121 King St.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Melbourn Victoria 3000 Australia</u>
	7. Purpose of Expenditure: <u>Website software</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>9/5/17</u>	4. Name: <u>Harland Clarke</u>
2. Amount \$ <u>44.18</u>	5. Address: <u>15955 La Cuesta Pkwy</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>San Antonio TX 78256</u>
	7. Purpose of Expenditure: <u>checks</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>9/27/17</u>	4. Name: <u>Joe Anderson</u>
2. Amount \$ <u>781.43</u>	5. Address: <u>4061 S. Cherokee St</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Englewood CO 80110</u>
	7. Purpose of Expenditure: <u>Reimbursement for Yard Signs</u> <input type="checkbox"/> Check box if Electioneering Communication

Schedule B – Itemized Expenditures Statement (\$20 or more)

[1-45-108(1)(a), C.R.S.]

Full Name of Committee/Person: Committee for Joe Anderson for City Council

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>10/10/17</u>	4. Name: <u>Facebook</u>
2. <u>Amount</u> \$ <u>25.03</u>	5. Address: <u>1 Hacker way, #</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Menlo Park. 94025</u> 7. Purpose of Expenditure: <u>Digital Advertising</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$ _____	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____ 7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$ _____	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____ 7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$ _____	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____ 7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$ _____	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____ 7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication